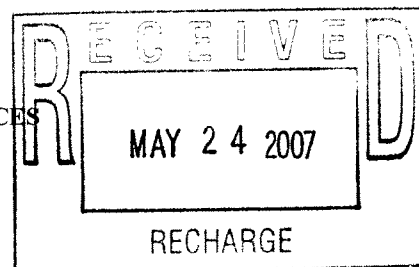


ARIZONA DEPARTMENT OF WATER RESOURCES  
Water Management Division  
3550 North Central Ave, 2<sup>nd</sup> Floor  
Phoenix, Arizona 85012-2105  
Phone (602) 771-8585 Fax (602) 771-8689



APPLICATION FOR UNDERGROUND  
STORAGE FACILITY PERMIT (A.R.S. § 45-811.01)

APPLICATION FEE \$ 750.00 DUE UPON FILING

PERMIT FEE OF \$ 500.00, PLUS NOTICE AND PUBLICATION FEES  
TO BE DETERMINED, WILL BE DUE PRIOR TO ISSUANCE OF  
PERMIT

PLEASE SUBMIT ONE ORIGINAL AND THREE COPIES OF THE  
COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS

FOR OFFICE USE ONLY

Application No.: 71-577501.0002

Date Received: 5-24-07

FACILITY DESIGN: (check one)

☒ Constructed

☐ Managed

APPLICATION FOR: (check one)

☐ Underground Storage Facility (USF)

☒ Modification of USF permit no.:

71- 577501.0001

☐ Renewal of USF permit no.:

71-

GENERAL INFORMATION

1. Name of Applicant: Central Arizona Water Conservation District  
P.O. Box 43020 Phoenix AZ 85080  
Mailing Address City State Zip  
Contact Person: Tom Harbour Telephone: 623-869-2107 Fax: 623-869-2376

2. Is this a State Demonstration Project? ☒ Yes ☐ No

(NOTE: Pursuant to A.R.S. § 45-893.01, only Conservation Districts qualify to participate in State Demonstration Project program.)

3. Name of Active Management Area or Irrigation Non-Expansion Area where the facility will be located:

Tucson AMA

(If the facility is NOT located within an AMA or INA, please indicate "NONE.")

4. Name of groundwater basin and subbasin where the facility will be located:

Upper Santa Cruz

5. Legal description of the location of the facility: Sec. 30, and SW 1/4, Sec. 19

T14S, R14E GSRB & M

(quarter/quarter/quarter/section, township and range – see Appendix C of USF Application Guide)

6. Does the applicant own the land where the facility is to be located? ☒ Yes ☐ No
7. The total design capacity of the facility: 500,000  
(acre-feet to be stored over the duration of the USF permit)
8. The maximum annual amount of water proposed for storage at this facility: 30,000  
(acre-feet per year)
9. Proposed duration of permit: May 24, 2004 to September 6, 2020  
(years)
10. Type of source water to be stored:  
☒ CAP Water ☐ Effluent ☐ Decreed and Appropriative Surface Water  
 If Decreed and Appropriative Surface Water, list river(s): \_\_\_\_\_
11. I agree under penalty of law to obtain any required floodplain use permit from the county flood control district before beginning any construction activities, as required by A.R.S. § 45-811.01(C)(4). ☒ Agree ☐ Disagree
12. **For managed USFs where effluent will be stored only:** Are you requesting that this facility be designated as a facility that could add value to a national park, national monument or state park, as described in A.R.S. § 45-811.01(D)?  
☐ Yes ☐ No  
 If yes, please submit a completed USF Permit Application Supplement to designate a Managed Underground Storage Facility as one that could add value to a national park, national monument, or state park and all additional information as described on the USF Permit Application Supplement.
13. **For permit modifications only,** give a brief description of the modification(s) requested by this application: \_\_\_\_\_  
Reduce water quality sampling frequency, eliminate monitoring water levels in 22 non-CAP wells

#### SUPPORTING EVIDENCE

**Check the following items that have been included with this submittal.** For a new USF application, all items **must** be submitted prior to receiving a complete and correct determination by the Department. For a modification to an existing USF permit, submit only those items that apply to the modification. For a full description of these requirements refer to the USF Application Report in the USF Application Guide.

14. USF Site and Facility Characteristics:

- ☐ Site Characteristics ☐ Geology  
☐ Facility Characteristics ☒ Hydrogeology

15. Unreasonable Harm and Hydrologic Feasibility Analysis:

- ☐ Procedures and Results for Calculating Maximum Area of Impact and Mounding Analysis  
☐ Land and Water Use Inventory ☐ Unreasonable Harm Analysis ☒ Monitoring Plan  
☒ Water Quality ☐ Hydrologic Feasibility Conclusions ☐ Operation and Maintenance

16. Legal Requirements:

☐ Technical Capability

☐ Financial Capability

☐ Legal Access

NOTARIZED SIGNATURE

I (We), Central Arizona Water Conservation District the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

623-869-2107  
Telephone

Thomas A. Harbour  
Signature of owner or authorized agent

Hydrologist  
Title

P.O. Box 43020 PHOENIX AZ 85080  
Mailing Address City State Zip

STATE OF ARIZONA )  
County of Maricopa ) ss.  
)

Subscribed and sworn to before me this 22nd day of May, 2007

Ardis McBee  
Notary Public

June 16, 2008  
My commission expires

